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Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. Attorney Docket No. UTILITY John L. Loth PATENT APPLICATION First Inventor Bearing Life Extender For Conveyor Type Rollers TRANSMITTAL Title (Only for new nonprovisional applications under 37 CFR 1.53(b)) Express Mail Label No. Mail Stop Patent Application Commissioner for Patents ADDRESS TO: APPLICATION ELEMENTS P.O. Box 1450 Alexandria VA 22313-1450 See MPEP chapter 600 concerning utility patent application contents. CD-ROM or CD-R in duplicate, large table or Fee Transmittal Form (e.g., PTO/SB/17) 1. (Submit an original and a duplicate for fee processing)
Applicant claims small entity status. Computer Program (Appendix) Nucleotide and/or Amino Acid Sequence Submission 2. 🖸 (if applicable, all necessary) See 37 CFR 1.27. Computer Readable Form (CRF) 12 3. 🔽 Specification [Total Pages\_ (preferred arrangement set forth below) Specification Sequence Listing on: - Descriptive title of the invention - Cross Reference to Related Applications - Statement Regarding Fed sponsored R & D CD-ROM or CD-R (2 copies); or - Reference to sequence listing, a table, or a computer program listing appendix - Background of the Invention - Brief Summary of the Invention c. Statements verifying identity of above copies - Brief Description of the Drawings (if filed) ACCOMPANYING APPLICATION PARTS - Detailed Description - Claim(s) - Abstract of the Disclosure Assignment Papers (cover sheet & document(s)) Power of 37 CFR 3.73(b) Statement 4. Drawing(s) (35 U.S.C. 113) [Total Sheets \_ 10. Attorney (when there is an assignee) 11. English Translation Document (if applicable) [Total Sheets\_ 5. Oath or Declaration Copies of IDS Information Disclosure a. Newly executed (original or copy) 12. V Statement (IDS)/PTO-1449 Citations b. Copy from a prior application (37 CFR 1.63(d)) **Preliminary Amendment** 13. (for continuation/divisional with Box 18 completed) Return Receipt Postcard (MPEP 503) 14. (Should be specifically itemized) Certified Copy of Priority Document(s) DELETION OF INVENTOR(S) (if foreign priority is claimed) Signed statement attached deleting inventor(s) Nonpublication Request under 35 U.S.C. 122 16. 🔲 name in the prior application, see 37 CFR (b)(2)(B)(i). Applicant must attach form PTO/SB/35 1.63(d)(2) and 1.33(b). or its equivalent. Application Data Sheet. See 37 CFR 1.76 6. Other: ..... 17. 18. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in the first sentence of the specification following the title, or in an Application Data Sheet under 37 CFR 1.76: Continuation-in-part (CIP) of prior application No.: ..... Divisional Continuation For CONTINUATION OF DIVISIONAL APPS only; The entire disclosure of the prior application, from which an oath or declaration is supplied under Box Art Unit: 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts. 19. CORRESPONDENCE ADDRESS OR Correspondence address below Customer Number: WVURC West Virginia University Research Corporation Office of Technology Transfer Attn: Dr. Shannon Sheehan Name Po Box 6216 Address Zip Code 26506-6216 State | West Virginia City Morgantown Fax 304-293-7498 Telephone 304-293-7160 Country United States Registration No. (Attorney/Agent)

This collection of information is required by 37 CFR 1.53(b). The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450.

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Date

Name (Print/Type) Dr. Shangon Sheehan

Signature

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## FEE TRANSMITTAL for FY 2003

Effective 01/01/2003. Patent fees are subject to annual revision.

Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT

(\$)	529.	.00
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Complete if Known					
Application Number					
Filing Date	10/23/03				
First Named Inventor	JohnL. Loth				
Examiner Name					
Art Unit					
Attorney Docket No.	193				

METHOD OF PAYMENT (check all that apply)	FEE CALCULATION (continued)					
Check ✓ Credit card Money Other None 3. ADDITIO						
Deposit Account:		Entity				
Deposit Account 5405015415457744	Fee Code	Fee (\$)	Fee Code	Fee (\$)	Fee Description	Fee Paid
Number	1051	130	2051	65	Surcharge - late filing fee or oath	
Deposit Account Name	1052	50	2052	25	Surcharge - late provisional filing fee or cover sheet	
The Commissioner is authorized to: (check all that apply)	1053	130	1053	130	Non-English specification	<u> </u>
Charge fee(s) indicated below Credit any overpayments		2,520	1812	2,520	For filing a request for ex parte reexamination	
Charge any additional fee(s) during the pendency of this application		920*	1804	920*	Requesting publication of SIR prior to Examiner action	
Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account.	1805	1,840*	1805	1,840*	Requesting publication of SIR after Examiner action	
FEE CALCULATION	1251	110	2251	55	Extension for reply within first month	
1. BASIC FILING FEE	1252	410	2252	205	Extension for reply within second month	
Large Entity Small Entity	1253	930	2253	465	Extension for reply within third month	
Fee Fee Fee Fee Pee Pee Pee Paid Code (\$) Code (\$)	1254	1,450	2254	725	Extension for reply within fourth month	
1001 750 2001 375 Utility filing fee 385.00	1255	1,970	2255	985	Extension for reply within fifth month	
1002 330 2002 165 Design filing fee	1401	320	2401	160	Notice of Appeal	
1003 520 2003 260 Plant filing fee	1402	320	2402	160	Filing a brief in support of an appeal	
1004 750 2004 375 Reissue filing fee	1403	280	2403	140	Request for oral hearing	
1005 160 2005 80 Provisional filing fee	1451	1,510	1451	1,510	Petition to institute a public use proceeding	
SUBTOTAL (1) (\$) 385.00	1452	110	2452	55	Petition to revive - unavoidable	
2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE		1,300	2453	650	Petition to revive - unintentional	
Fee from	1501	1,300	2501	650	Utility issue fee (or reissue)	
Extra Claims below Fee Pal Total Claims 36 -20** = 16 x 9 = 144	71		2502		Design issue fee	
Independent	1503	630	2503		Plant issue fee	
Claims - 3** =	1460	130	1460		Petitions to the Commissioner	
Large Entity   Small Entity	1807	50	1807		Processing fee under 37 CFR 1.17(q)	
Fee Fee Fee Fee Description	1806	180	1806		Submission of Information Disclosure Stmt	
Code (\$)   Code (\$)   1202 18   2202 9 Claims in excess of 20	8021	40	8021	1 40	Recording each patent assignment per property (times number of properties)	
1201 84 2201 42 Independent claims in excess of 3	1809	750	2809		Filing a submission after final rejection (37 CFR 1.129(a))	
1203 280 2203 140 Multiple dependent claim, if not paid 1204 84 2204 42 ** Reissue independent claims	1810	750	2810	375	For each additional invention to be examined (37 CFR 1.129(b))	
over original patent	1801	750	2801	375	Request for Continued Examination (RCE)	
1205 18 2205 9 ** Reissue claims in excess of 20 and over original patent	1802	900	1802	900		
SUBTOTAL (2) (\$) 529.00	Othe	fee (sp	ecify) _			
**or number previously paid, if greater; For Reissues, see above			Basic f	Filing F	ee Paid SUBTOTAL (3) (\$)	
					., 147.	

or number prev	lously paid, if greater, For Reissi	des, see above		JOBICIAL	- (a) (a)	
SUBMITTED BY				(Complete	(if applicable)	
Name (Print/Type)	Shannon Sheehan	Shannon Sheehan Registration No. (Attorney/Agent)		Telephone	304-293-7160	
Signature	Mun	Muleran		Date	10/2303	

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